Appendix B-2 – Test Results Format

| CALIFORNIA STATE FIRE MARSHAL PIPELINE SAFETY DIVISION HYDROSTATIC TEST RESULTS PIPELINE DATA | | | | | | | | | | |
|--|---------------------------------|--------|----------------|--|---|--------|----------------------|----------------------|-------|--|
| Test Date | | | CSFM Test ID # | | | | | | | |
| Pipeline Operator | | | | Independent Testing Firm | | | | | | |
| Kind of Test |] 3 Year [] 5 Year [] 10 Year | | | | | | | | | |
| Pipeline Identification (description, line number, name, pre-tested pipe, etc.) | | | | | | | | | | |
| [] Pre-tested pipe | | | | | | | | | | |
| Pipeline Location (mile post, street, station, etc.) | | | | | | | | | | |
| CSFM #: 00000-0000 From: To: | | | | | | | | | | |
| Normal Product Transported | | | | | | | | | | |
| Test Medium [|] Water [] Dies | sel [] | Fuel Oi | il | [|] JP-5 | | [] | Other | |
| Location of Deadweight Tester | | | | Ele | | | Elev | evation | | |
| | | | | | | | | | | |
| Elevation of Pipeline - High Point Low Point | | | | | | | | | | |
| Maximum Operating Pressure (Based on 80% of Minimum Test Pressure) | | | | | | | | | | |
| PIPE DATA | | | | | | | | | | |
| Pipe O.D. | Wall Thickness (SYMS) | | on & Gra | ade Length of Pipe Bei tested (ft.) | | | e Beir | ng Volume (Barrels) | | |
| • | | | | | | | | | | |
| | | | | | | | | | | |
| TEST EQUIPMENT | | | | | | | | | | |
| Make of Deadweight Tester | | | | Serial # | | | | Date Last Calibrated | | |
| Make of Pressure Chart Recorder | | | | Serial # | | | | Date Last Calibrated | | |
| Make of Temperature Recorder | | | | Serial # | | | Date Last Calibrated | | | |
| COMMENTS (additional Information) | | | | | | | | | | |
| GPS LOCATIONS: Beginning Location: | | | | Ending Location: | | | | | | |
| Latitude: | | | | Latitude: | | | | | | |
| Longitude: | | | Longitude: | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

| TEST DATA | | | | | CSFM TEST ID # | | | | | | | |
|---|----------------|----------------------------------|-----------------------------|--|-----------------|-----------------|--|----------|--|--|--|--|
| Date | Time | Deadweight Pressure (psig) | Chart Pressure (psig) | Pipe Wall Temp | Ambient Temp | Medium Temp. | Test Medium Change (+) Added (-) Drained | Comments | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| : | | | | | | | | | | | | |
| Net Chang | je: LIST ΔΙ | LIFAKSON | I INF PIPF F | PESIII TING | FROM LINS | UCCESSEU | I TEST ATTE | MPTS | | | | |
| | LIOTA | LOCATION | | FROM UNSUCCESSFUL TEST ATTEMPTS CAUSE | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| CERTIFICATION | | | | | | | | | | | | |
| Name of Company Conducting Test | | | | | | | | | | | | |
| Name of Independent Testing Firm Witnessing Test | | | | | | | | | | | | |
| Name of Certified Independent Witness on Site | | | | | | | | Date | | | | |
| Pipeline Operator's Representative on Site | | | | | | | | Date | | | | |
| Name of Person Certifying Test Data for Witnessing Firm | | | | | | | | Date | | | | |

Г